


## POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Electronic Version v05

Stylesheet Version v05.0

<b>Title of Invention</b>	<b>BACKGROUND ATSC PSIP RETRIEVAL PROCESS</b>		
First Named Applicant : Mr. Anirudh J. JOSHI			
Attorney Docket Number : PR 1804.01 US			
I hereby appoint the registered practitioner(s) at Customer Number:			
31883			
as attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.			
I am the Applicant/Inventor.			
Full Name of Applicant of Record:			
Mr. John Gildred			
Signature: /John Gildred/		Date: 2003-12-17	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

**POWER OF ATTORNEY OR  
AUTHORIZATION OF AGENT**

Application Number	not yet known
Filing Date	herewith
First Named Inventor	Anirudh J. JOSHI
Title	BACKGROUND ATSC PSIP...
Art Unit	not yet known
Examiner Name	not yet known
Attorney Docket Number	PR 1804.01 US

I hereby appoint:

☒ Practitioners at Customer Number **31883**  
**OR**
☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☒ The above-mentioned Customer Number.  
**OR**
☐ Practitioners at Customer Number   
**OR**
☐ Firm or  
Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
*Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).*
**SIGNATURE of Applicant or Assignee of Record**

Name

John Gildred

Signature

Date

12/10/03

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ Total of One (1) forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.